**Declaration on Honor for “Social Top-Up” Funding in the Erasmus+ Program**

I, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (first name, last name), born\_\_\_\_\_\_\_\_\_\_ in \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (date of birth, place), hereby confirm that I will spend my traineeship abroad at the institution/organization\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (name of traineeship provider) in\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_(city, country) during the period from \_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_.

I confirm that I have looked at the following website on Erasmus+ funding and the "Social Top-Ups" - <https://www.en.eu-servicepoint.de/financial-support>, have been informed about the conditions and criteria of the individual social top-ups and I am aware of these options.

*Please tick the appropriate box:*

[ ] Social Top-Up for "students with child(ren)"

[ ] Social Top-Up for "students with disabilities"

[ ] Social Top-Up for students with a "chronic illness which causes increased additional

financial needs abroad"

[ ] Social Top-Up for "students from a non-academic family background” – first-time academics

[ ] Social Top-Up for "continuously employed students”

[ ] None of the above-mentioned "Social Top-Ups" apply to me

*Note: The "social top-ups" cannot be accumulated. Even if several criteria apply to you, you would only receive the monthly special grant once. Please still indicate all points that apply to you above.*

**I hereby declare on my honor that I meet the conditions of the relevant "social top-ups" (if applicable), that I have proof of this and that I can present this on request (obligation to keep records for 5 years!).**

I have provided all information to the best of my knowledge and acknowledge that in case of *false statements* I will have to repay the approved funds in part or in full to the EU ServicePoint.

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| --- |
| Signature |
| Full name (in print):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Place, date Signature |

**Please send the signed document as a PDF with your other application documents to:**

**eu-servicepoint@international.uni-mainz.de**